PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION.

PATEN	T APPLICATION FEE DETERMINATI Substitute for Form PTO-875	APINCA APINCA	on or Pocket Nusco	er.	
, C	AIMS AS FILED - PART I (Column 1) (Column 2)	SMALL ENTITY	Oft	OTHER THAN SMALL ENTITY	
FOR BASIC FEE	NUMBER EXTRA	RATE FEL	7		
(37 CFR 1.16(a)) TOTAL CLAIMS		:385.	OR	1 170 S	5
(37 CFR 1.16(c)) INDEPENDENT CLAIMS	minus 20 =	× \$ (1.12) =	OR	x \$18.0=	-
(37 CFR 1.16(b))	minus 3 = •	× \$ 13.0 =	OR	x \$ 86.0=	-
MULTIPLE DEPENDENT CL		+s/45°=	OR	+ \$290.2	
	1 is less than zero, enter "0" in column 2.	TOTAL	OR	TOTAL	1
CLAIMS	S AS AMENDED – PART II				1
4 0 00 C	umn 1) (Column 2) (Column 3) LAIMS HIGHEST	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	,
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The "Highest Number Provi	iously Paid Full (T. I HIS SPACE is less than 3, enter	"3"	ny in column		
O to process) an application	equired by 37 CFR 1.16. The information is required by 37 CFR 1.16. The information is required confidentiality is proverged by 35 LLC C.	to obtain or retain a benefit by t	he public wh	ich is to file for LL #	

OSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

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PATENT	APPLICATION FEI	ns are required to respo	U.S. Patent and Trade and to a collection of informa	mark Office; U.S tion unless it dis	brough 7/31/2006. DEPARTMENT	OMB 0651-0 OF COMMER	0032 RCE
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* If the difference in column 1 is less than zero, enter "0" in column 2.			+ s/45 ²	OR	+ s290, 2		
		*	TOTAL	OR	TOTAL		7
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AF AMEN Total (37 CFR 1.16(b)) Z Independent (37 CFR 1.16(b))	Q Minus ··· ·	3	x \$ 9 =	OR	× s/8 =	<u> </u>	-
FIRST PRESENTATION OF	MULTIPLE DEPENDENT CLAIM	/07	× s43 =	OR	× \$ 86 =		
	ENDERT CEANIN	(37 CFR 1.16(d))	+ s/43 =	OR	+ s 29D=	·	1
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lection of information is requ	ously Paid For IN THIS SPA usly Paid For (Total or Indep uited by 37 CFR 1.16. The i	endent) is the highest n	ு. umber found in the appropri	ate box in colum	n 1		

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